P 10/10/07 10:53:00 22 BK 122 PG 283 DESOTO COUNTY, MS W.E. DAVIS, CH CLERK

emy *

Prepared By:
RECORDING REQUESTED BY:
LSI -Gred Perdziola
700 Cherrington Parkway
Coraopolis, PA 15108
SOC-727-0300
WHEN RECORDED MAIL TO:
LSI
700 Cherrington Parkway
Coraopolis, PA 15108

LIMITED DURABLE POWER OF ATTORNEY

Caution: This is an important document. It gives the person whom you designate (your "Agent" or "Attorney in Fact") broad powers to act on your behalf for a specific transaction during a certain period of time, which may include powers to promise to repay a debt with interest and mortgage your real property following your review of your loan documentation during a loan closing to be conducted on the internet. With respect to any loss of, misplacement of, inaccuracy in, or failure to sign any loan documentation, your Agent or Attorney in Fact will continue to have these powers, even if you become incapacitated or incompetent after the loan closing, for the limited purpose to replace or correct such loan documentation. If the attorney in fact has actual knowledge of any disability or incompetence before or during closing the powers contained herein will cease to exist. This document does not authorize anyone to make medical or other health care decisions for you. Signing this Limited Durable Power of Attorney is optional. Although designating your Agent or Attorney in Fact should make your loan closing more convenient, you are not required to sign this document in order to obtain your loan. Before you decide whether to sign or if you do not understand the purpose or effect of this form, you should consult an attorney.

BE IT KNOWN, that I,

Jill C. Darby, Single

Whose address is:

4665 Stone Cross Dr Olive Branch, MS 38654

Make and appoint the following persons who are employees of LSI, namely: Shannon Obringer, Rickard Callen, Ryan Flaherty, Thomas Betz and Greg Perdziola, each of whom may act separately, whose addresses are C/O LS1, at 700 Cherrington Parkway, Coraopolis PA 15108, as my true and lawful Attorneys in Fact or Agents to act for me in my name, place and stead, for the following specific and limited purposes:

(1) Refinancing of the Real Estate located at and legally described as (the "Property"): 4665 Stone Cross Dr Olive Branch, MS 38654

The following described property situated in the County of DeSoto, State of Mississippi, together with all improvements and appurtenances thereon more particularly described as follows:

Lot 153, Phase III, Windstone Subdivision, situated in Section 26, Township 1 South, Range 7 West, DeSoto County, Mississippi, as per Plat thereof recorded in Plat Book 86, Page 17, in the Office of the Chancery Clerk of DeSoto County, Mississippi.

WITH THE APPURTENANCES THERETO. APN: 1 07 7 26 12 0 00153 00

1



- (2) To mortgage, finance, refinance, hypothecate, assign, transfer and in any manner deal with the Property to effectuate the above referenced refinancing (which may also be called "banking transactions" under state statute) with Countrywide Home Loans, Inc. ("Lender"). The refinancing is estimated to occur on or about September 13, 2007 with a loan amount not to exceed \$32,200.00.
- (3) To execute, acknowledge receipt of, approve, and deliver all documents including but not limited to:
- a. Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including any documents necessary or requested as part of this transaction by the title insurer, lender or other parties to the transaction;
 - b. those documents needed by governmental and taxing authorities;
- c. lien waivers, subordination/waiver of homestead and any marital rights necessary to obtain the financing; and
- d. escrow instructions, closing or settlement statements, truth in lending disclosures (including notice of my right to rescind the credit extension, if applicable), loan applications, HUD-1 and other written instruments relating to the transaction.

This Durable Power of Attorney is effective immediately and is limited to the specific transaction described above. I may revoke this Power of Attorney at any time by providing written notice to my Attorney in Fact or Agent at Closing Stream Department C/O LSI, 700 Cherrington Parkway, Coraopolis, PA 15108. If the Power of Attorney is recorded, any revocation will not be effective as to third parties until the revocation is recorded in the same county or other established governmental authority for the recording of Powers of Attorney. This Power of Attorney will terminate immediately upon the proper recording of all documents necessary or requested as part of this transaction by the title insurer, lender or other parties to the transaction, except with respect to any loss of, misplacement of, inaccuracy in, or failure to sign any loan documentation, these powers will continue to exist even if I become incapacitated or incompetent after the loan closing far the limited purpose to replace or correct such loan documentation.

Conflict of Interest Disclosure. This is to give notice that LSI receives fees for escrow and title services from Countrywide Home Loans. These fees will be detailed on your Settlement Statement that accompanies your loan documents. The attorneys in fact listed above will act individually as your representative with no independent financial or employment motivations to complete the settlement. The attorneys in fact listed above will be bound by his or her fiduciary duty as set forth in the following Acknowledgement of Attorney-In-Fact.

I understand that this Durable Power of Attorney is not an approval of my loan application request or a commitment by Lender to make a mortgage loan. Should my loan application request not be approved by Lender, this Durable Power of Attorney will be null and void.

TO INDUCE ANY THIRD PARTY TO ACT, I AGREE THAT ANY THIRD PARTY RECEIVING AN EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT ON THIS INSTRUMENT. ANY REVOCATION OR TERMINATION OF THIS INSTRUMENT WILL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNTIL SUCH THIRD PARTY HAS ACTUAL OR CONSTRUCTIVE NOTICE OF SUCH REVOCATION OR TERMINATION. I, FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING REASONABLY RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

| Dated: Qug. | 30 . 200.7 . | July C | Darby | |
|--|---------------------|---|---|----------------------------|
| Butted. | | Jill C. Darby | | |
| Dated: | , 200 | | | |
| Specimen signature o | f AGENT/Attorney | in Fact: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ·- |
| Witness: | | _ | | |
| Witness: | | _ | | |
| | | | | |
| | | | | |
| ALL-PURPOSE AC | KNOWLEDGEME C | NT | | |
| State of | <u>5</u> | | | |
| County of | before me | J. J. | Motary Public | |
| On 8/30/12 personally appeared | Zuce Pa | MAMERILEOF OF THE FIF | JANE DOE, NOTARY PUBLIC" | |
| | | proved to me on the basis | of satisfactory evidence se name(s) is/are subscrib | sed to |
| THE THE PARTY OF T | | the within instrument a he/she/they executed the capacity(ies), and that by | nd acknowledged to me same in his/her/their author y his/her/their signatures((s), or the entity upon beh | e that orized (s) on |
| My Commission Expires Wy Commission Expires Any Commission Expires PUBLIC STARY October 3: 2007 | | which the person(s) acted | l, executed the instrument. | |
| October 3 5001 | WILLIAM OUNT | WITNESS my hand and | official/seal. | |
| PUBLIC S | A WILLIAM | Teremony Sylvarian of N | · Kieffier | |
| Mannannan I | • | Commission Expires. | | |

ACKNOWLEDGMENT OF ATTORNEY-IN-FACT

I, AGENT, have read the attached power of attorney and am the person identified as the attorney-in-fact (the "agent") for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in state law., when I act as agent:

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

AGENT

Signature of Attorney-in-Fact

9-13-07

Date

Specimen signature of AGENT/Attorney in Fact:

APN: 1 07 7 26 12 0 00153 00

Order ID: 3800583 Loan No.: 179186885

EXHIBIT A LEGAL DESCRIPTION

The land referred to in this policy is situated in the State of MS, County of DE SOTO, City of OLIVE BRANCH and described as follows:

The following described property situated in the County of DeSoto, State of Mississippi, together with all improvements and appurtenances thereon more particularly described as follows:

Lot 153, Phase III, Windstone Subdivision, situated in Section 26, Township 1 South, Range 7 West, DeSoto County, Mississippi, as per Plat thereof recorded in Plat Book 86, Page 17, in the Office of the Chancery Clerk of DeSoto County, Mississippi.

WITH THE APPURTENANCES THERETO.

APN: 1 07 7 26 12 0 00153 00